

POSITION	ID NO.	DATE
CLASSIFIER	6	9-4-97
EXAMINER		
TYPIST	450	10/4/97
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

# INDEX OF CLAIMS

Final	Original	Claim	Date
1	✓	1	10/18/97
2	✓	2	10/18/97
3	✓	3	10/18/97
4	✓	4	10/18/97
5	✓	5	10/18/97
6	✓	6	10/18/97
7	✓	7	10/18/97
8	✓	8	10/18/97
9	✓	9	10/18/97
10	✓	10	10/18/97
11	✓	11	10/18/97
12	✓	12	10/18/97
13	✓	13	10/18/97
14	✓	14	10/18/97
15	✓	15	10/18/97
16	✓	16	10/18/97
17	✓	17	10/18/97
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20	✓	20	10/18/97
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47	✓	47	10/18/97
48	✓	48	10/18/97
49	✓	49	10/18/97
50	✓	50	10/18/97

ST AVAILABLE COPY

SYMBOLS  
 ✓ Rejected  
 - Allowed  
 (Through number) Canceled  
 + Restricted  
 N Non-elected  
 I Interference  
 A Appeal  
 O Objected

Final	Original	Claim	Date
51	✓	51	10/18/97
52	✓	52	10/18/97
53	✓	53	10/18/97
54	✓	54	10/18/97
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100	✓	100	10/18/97